HIV Testing

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I. Introduction

There is a continued need for high-quality, questionnaire-based data to develop and evaluate HIV, STD, and TB prevention/elimination programs. Self-reported behavioral data can compliment incidence and prevalence surveillance data in monitoring and anticipating the course of an epidemic. Questionnaire-based data related to HIV/STD and TB prevention is collected in a number of settings including general population surveys, behavioral surveillance systems of high-risk and infected populations, and as part of intervention studies. However, the necessary integration of data derived from these systems is often hampered by a lack of comparability between data items intended to measure the same behavior or concept.

The HIV-STD Behavioral Surveillance Working Group was formed in the fall of 1997 to address the need for comparable data across various data systems by developing and promoting the use of common questionnaire items related to HIV/STD/TB risk and prevention. The HIV-STD BSWG seeks to coordinate and enhance existing data systems and methods, in order to provide data for use of planning and evaluating prevention programs at the national, state, and local levels. The core items offered here on HIV Testing behaviors, as well as the Sexual Behavior and Drug-Related Risk core items, are the principal results of this effort.

The text preceding the core items provides a synopsis of the purpose, scope, and current development status of the core items for HIV Testing behavior. Interested readers are referred to Introduction to the Core Questions for a more detailed explanation of the rationale and methods used by the working group to produce the core items.

II. Purpose and Scope

Prevention planners and policy makers working at the national, state, and local level require timely, relevant, and representative HIV risk and preventive indicator data to develop rational and effective prevention programs and policies. There is wide consensus that the lack of coordination across questionnaire-based data collection

systems for these indicators precludes these systems from providing the information required. The core question items were developed to address one aspect of the coordination effort; that of improving the comparability of data items that are intended to measure the same behavior or concept across systems. The purpose of the core question items then, is to promote standardization of key items across disparate data systems so that minimal data needs of prevention planners and policies makers can be addressed.

Behavioral (and other) indicators are currently collected at the general population, infected population, and high-risk population levels. General population surveys typically have strong sampling methodology and provide results that are generalizable to the total population. They can measure the impact of prevention programs on the general population, and can provide a baseline with which to compare high risk samples. However, they provide limited information on relatively rare risk behaviors, particularly among high-risk subgroups such as men who have sex with men and injection drug users. Surveillance of infected populations yields information on risk for infection acquisition and ongoing transmission, but do not provide information on atrisk, yet uninfected populations. Surveillance among high-risk populations fills this void, but is often dependent on convenience sampling, and therefore limits the degree to which the results can be generalized. The necessary integration of data derived from these systems is often hampered by a lack of comparability between data items intended to measure the same behavior or concept. Use of the core questions as a common standard would allow for integration, and thus vastly improve the quality and quantity of information produced.

The core question items are not intended to serve as a complete, "off the shelf" survey. Rather, they suggest: (1) a standard question and response format for items, and (2) only those items that are considered to address minimal data needs, or "core" items. The items offered here are considered the basic and necessary components to be included in questionnaire-based measures of HIV Testing behaviors at the three population levels.

To allow for comparison across all three surveillance levels, but address only the minimal data needs for each, two "tiers" of questions were developed. The first tier questions are considered the minimal number of questions to be used in all surveys. These questions are suitable for general population surveys, and thus do not include questions of high-risk behaviors that are relatively rare among the general population. The second tier questions include the first tier, as well as additional questions that obtain more detailed information about high risk behaviors that are relevant to high-risk and infected populations. The additional items in the second tier are intended to address minimal data needs for high risk and infected populations.

The core question items are intended to be serviceable across a broad range of surveys with various objectives, target populations, and data collection settings, while maintaining a sound methodology and addressing the identified minimal data needs.

Even so, it is recognized that the questions are not capable of serving the specific purpose of every researcher. First, because the core questions address only minimal data needs, they consequently exclude an array of important questions and topics of interest to researchers. Second, the core items were developed to suit interviewer administration, and may need to be adapted for use in other settings (e.g., self-administered). It is also likely that the formatting (e.g., question order), or question wording may not suit the particular situation (e.g., for a jail or prison setting). It is also possible that only certain items from the second tier are relevant for the study. Therefore, researchers are encouraged to add additional questions of interest, extract relevant portions when necessary, change the format, and otherwise adapt the core questions to suit the unique purpose of their study.

We hope that persons conducting studies will be able to adopt the questions we recommend. We realize that in some instances researchers may find it necessary to use a different form of a question, for example in order to maintain a continuous time series. In those cases we would urge the researchers to adopt both questions – this would have numerous advantages, allowing for internal as well as cross-study comparisons, and maintaining time series. The small number of basic core questions adds little additional cost, especially in light of the many benefits.

III. Development and Status

The methodology employed by the working group to develop the core measures can be best described as a modified Delphi approach and is comprised of the following iterative steps: 1) identification of existing surveys, questions, and relevant behavioral elements; 2) creation of a survey database; 3) review of published data or analyses of existing available data; 4) discussion of draft core questions; 5) distribution of draft questions to internal and external consultants to obtain feedback; 6) cognitive testing; 7) inclusion of core questions in existing surveys to obtain pilot data; 8) redrafting of questions on the basis of pilot data and feedback; 9) dissemination and support of core questions; 10) ongoing evaluation, feed-back, and adaptation of questions.

All of the core measures are developed and continually revised by this iterative process. The HIV Testing core measures offered here are currently under review. We encourage you to send your feedback on these questions to Danni Lentine (DLentine@cdc.gov), or join our discussion board conversation. Further refinements of the questions will be made based on this feedback, results of cognitive testing, and the results of pilot testing.

The working group identified and adopted the "critical event" concept to guide the development of all the core question items. Using the critical event approach, questions refer to the behavior of the respondent the last time the event occurred. The advantages of this approach include minimal recall bias and simple categorical (yes/no) responses. The disadvantage of using critical events is the potential of losing detail on less likely events. There again, researchers are encouraged to use additional questions that obtain the data of interest.

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I am going to ask about giving blood donations to a blood bank, such as the American Red Cross.

1. Have you donated blood since March 1985?

100	[+]				
No	[2]		(skip to Q3b)		
Refuse			(skip to Q3b)		
Don't k	cnow [8]		(skip to Q3b)		
2. When was f	he last time you	ı donate	d blood?		
	_/		u blood.		
20. The next of	uagtiong and ah	out the t	east for UIV the rimus	that aguaga A	IDS. Have you ever been
-			nay have had as part o		-
Yes	[1]	its you in	(skip to Q5a)	n blood dollati	.OHS.
No	[2]		(skip to Q4)		
Refuse		[7]	(skip to Q8)		
Don't k		[.]	(skip to Q8)		
3h The next a	uestions are ah	out the t	test for HIV the virus	that causes A	IDS. Have you ever been
tested for HIV		out the t	est for filty, the virus	tilut cutises i	ibs. Have you ever been
Yes	[1]		(skip to Q5b)		
No	[2]		(go to Q4)		
Refuse			(skip to Q8)		
Don't k			(skip to Q8)		
4. I am going t	o read vou a lis	st of reas	sons why some people	have not been	tested for HIV. Which
			IN reason why you have		
responses indic	cated]				
[01]			en exposed to HIV;		
[02]			out if you were HIV po		
[03]			k about HIV or about b		
[04]			name would be reported	ed to the govern	nment if you tested positive
[05]	You don't like				
[07]			lts to be confidential		
[80]		of losing	g job, insurance, housin	g, friends, fami	ily, if people knew you was
5007	HIV positive	_	_		
[09]			e to get tested or		
[10]	Some other rea	son (spe	cify)
Do not read [77]	Refused				
Do not read [88]	No particular r	eason			
Do not read [99]	Don't Know				
(Now go to Q8))				
	•				

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5a.	of bloc	was the last time you were tested for HIV, other than tests you may have had as part od donations?
(Now	go to Q6	
5b.		was the last time you were tested for HIV?
		g your blood donations), which of these would you say was the main reason for your last HIV responses indicated]
test.	[1]	Just to find out/Worried that you are infected
	[2]	Because a doctor, nurse or other health care professional asked you to
	[3]	Because the Health Department asked you to
	[4]	Because sex partner asked you to
	[5]	For hospitalization or surgical procedure
	[6]	To apply for health insurance or life insurance
	[7]	To comply with guidelines for health workers
	[8]	To apply for a new job
	[9]	For military induction, separation, or during military service
	[10]	For immigration
	[11]	Because of pregnancy
	[12]	Other reason - specify
	[77]	Refused
	[99]	DK

Version 9.00: September 26, 2000 HIV TESTING QUESTIONS: FIRST TIER

7.		e did you have your last HIV test? [If response is "at a clinic", probe for type of clinic
	[01]	Private doctor/HMO
	[02]	Counseling and testing site
	[03]	Hospital (inpatient)
	[04]	STD clinic
	[05]	Family planning clinic
	[06]	Prenatal clinic
	[07]	Tuberculosis clinic
	[08]	AIDS/infectious disease clinic
	[09]	Military clinic
	[10]	Insurance clinic
	[11]	Employer clinic
	[12]	Community health clinic or public health clinic
	[13]	Outpatient hospital clinic or ER
	[14]	Correctional facility (jail or prison)
	[15]	Drug treatment facility
	[16]	At home, with a home test kit
	[17]	At home, by nurse or health care worker
	[18]	Other location (specify)
	[77]	Refused
	[99]	Don≠ Know
8.	How l	ikely is it that you will get tested in the next year? Would you say:
	[1]	Very likely
	[2]	Somewhat likely
	[3]	Somewhat unlikely
	[4]	Very unlikely
****	*****	**************************************

HIV TESTING QUESTIONS: SECOND TIER

I am going to ask about giving blood donations to a blood bank, such as the American Red Cross.

1 II.	ave you donated bloo	od sinaa Ma	wah 10059
1. Па	Yes	11] [1]	rcii 1965?
	No	[2]	(skip to Q2a)
	Refused	[7]	(skip to Q2a)
	Don't know	[8]	(skip to Q2a)
2. W	hen was the last tim		ed blood?
(If in	past 12 months ask	2aa; other	wise go to 2a.)
2aa.	Was one you your r	easons for	donating blood because you wanted to be tested for HIV, the
virus	that causes AIDS?		
	Yes	[1]	
	No	[2]	
	Refused		[7]
	Don't know	[8]	
wher 2a. l	re they will pay you	for donating or plasma a [1] [2] [7] [8]	at a plasma center since March 1985? (ask Q2) (if Q1 is yes, ask Q3a, if not, Q3b) (if Q1 is yes, ask Q3a, if not, Q3b) (if Q1 is yes, ask Q3a, if not, Q3b)
	/	•	nood of plasma:
blood	d test, but could have	e involved a	
	na donations?	tested for I	HIV, other than tests you may have had as part of blood or
	Yes	[1]	(skip to Q5a)
	No	[2]	(skip to Q4)
	Refused	[7]	(skip to Q8)
	Don't know	[8]	(skip to Q8)

HIV TESTING QUESTIONS: SECOND TIER

3b. 1	Have you	ever been tested f	for HIV?				
	Yes			p to Q6a)			
	No	_		to Q4)			
	Refuse	_	_	p to Q8)			
	Don't k	-		p to Q8)			
one o		buld you say is the cated] It's unlikely you'very You were afraid to You didn't want to You were worried You don't like need You don't trust the You are afraid of	e MAIN re we been exp o find out i o think about I your name edles e results to	ason why cosed to H f you wer out HIV o e would b	y you had HIV; re HIV per about the reportant	e have not been tested for ave not been tested? [Read positive being HIV positive ted to the government if young, friends, family, if people	d ou tested positive
		HIV positive					
	[09]	You didn't know	_				
	[10]	Some other reason	n (specify_)	
Do not		Refused No particular reas Don't Know	on				
5.		yone ever <u>recomn</u>		at you ge	t an HI	V test?	
	Yes		[1]				
	No		[2]		to Q14		
	Refuse		[7]	` .	to Q14		
	Don't k	now	[8]	(skip	to Q14)	
5a.		ecommended you octor/nurse/other h				s <i>indicated]</i> A friend or relative	
		ex partner	•	-		Someone else [specify]
		omeone at health de	epartment		[77]	Refused	
	[04] Aı	n outreach worker			[99]	Don≠ know	
	[05] Dr	rug sharing partner					

(Now skip to Question 14)

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6a.	of blo	n was the last time you were tested for HIV, except for tests you may have had as part od or plasma donations?
6b.		was the last time you were tested for HIV?
	results?	
		times
iast H	[1]	Just to find out/Worried that you are infected
	[2] [3]	Because a doctor, nurse or other health care professional asked you to Because the Health Department asked you to
	[4]	Because sex partner asked you to
	[5]	For hospitalization or surgical procedure
	[6]	To apply for health insurance or life insurance
	[7]	To comply with guidelines for health workers
	[8]	To apply for a new job
	[9] [10]	For military induction, separation, or during military service For immigration
	[11]	Because of pregnancy
	[12]	It was part of a research study
	[13]	Other reason - specify
	[77]	Refused
	[99]	DK

Version 9.00: September 26, 2000 HIV TESTING QUESTIONS: SECOND TIER

9.	When	re did you have your last HIV test? [If response is "at a clinic", probe for type	of clinic]
	[01]	Private doctor/HMO	
	[02]	Counseling and testing site	
	[03]	Hospital (inpatient)	
	[04]	STD clinic	
	[05]	Family planning clinic	
	[06]	Prenatal clinic	
	[07]	Tuberculosis clinic	
	[08]	AIDS/infectious disease clinic	
	[09]	Military clinic	
	[10]	Insurance clinic	
	[11]	Employer clinic	
	[12]	Community health clinic or public health clinic	
	[13]	Outpatient hospital clinic or ER	
	[14]	Correctional facility (jail or prison)	
	[15]	Drug treatment facility	
	[16]	At home, with a home test kit	
	[17]	At home, by nurse or health care worker	
	[18]	Other location (specify)	
	[77]	Refused	
	[99]	Don≠ Know	
10.	Yes No Refus	you get the results of your last test? [1] [2] sed [7] t know [8]	
11.		last time you were tested for HIV, were you asked to give your first and last i	name?
	Yes No	[1] [2]	
	Refus		
		t know [8]	
	Don't	t Kilow [6]	
12.	Was	last time you were tested for HIV, which of the following types of HIV test wait: [Read all response options]	as used?
		ood test, and you had to return in a few weeks for the results	[1]
		ood test, and you got the results within 24 hours	[2]
		iva test, where you or someone else took a swab from your mouth.	[3]
		ne test	[4]
		me test kit, where you used a self-sampling kit to get a blood sample	[5]
	Or so	ome other type of test (specify)[[6]

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o efused on't know	[2] [7] [8]				
on't know	[8]				
ow likely is it tha	ıt you will	get tested <u>in</u>	the next yea	<u>r</u> ? Would yo	ou say:
ery likely	[1]			_	•
mewhat likely	[2]				
mewhat unlikely					
•					
	ery likely omewhat likely	ery likely [1] omewhat likely [2] omewhat unlikely [3]	ery likely [1] omewhat likely [2] omewhat unlikely [3]	ery likely [1] omewhat likely [2] omewhat unlikely [3]	omewhat likely [2] omewhat unlikely [3]